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| Fill in this info | ormation to identify your | case: | | | | | | | | | | | | |
|---------------------|---------------------------|--------------------|----------------|-------|--|-------------|-------------|-------------|-------------|-------------|-------------|---------------|---------------|---------------|
| Debtor 1 | Leea Woodlin | | | ì | | | | | | | | | | |
| | First Name | Middle Name | Last Name | ı | | | | | | | | | | |
| Debtor 2 | | | | | | | | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | | | | | | | | |
| United States E | Bankruptcy Court for the: | EASTERN DISTRICT C | F PENNSYLVANIA | | | | | | | | | | | |
| Case number | 24-11326 | | | | | | | | | | | | | |
| (if known) | | | | | | \boxtimes (| \boxtimes (| \boxtimes C |
| | | | | | | | | | | | | 6 | a | а |

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | rt 1: Identify the Property You Claim as E | xempt | | | | | | | | | | |
|----|---|--------------------------------------|-------------|---|------------------------------------|--|--|--|--|--|--|--|
| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | | | | | | | | |
| | ☐ You are claiming state and federal nonbar | nkruptcy exemptions. | 11 L | J.S.C. § 522(b)(3) | | | | | | | | |
| | ∑ You are claiming federal exemptions. 1 | 1 U.S.C. § 522(b)(2) | | | | | | | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | | | | | | | |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | | | | | | | |
| | 6622 N. Lawrence Street , | \$166,442.00 | \boxtimes | \$13,950.00 | 11 U.S.C. § 522(d)(1) | | | | | | | |
| | Philadelphia, PA 19126-0000 Philadelphia County FMV \$208,052 (minus 10% cost of sale) = \$166,442 Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | | | |
| | Living room set, dining room, | \$1,500.00 | \boxtimes | \$1,500.00 | 11 U.S.C. § 522(d)(3) | | | | | | | |
| | bedroom sets Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | | | |
| | Televisions (4), computer | \$2,200.00 | \boxtimes | \$2,200.00 | 11 U.S.C. § 522(d)(3) | | | | | | | |
| | Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | | | |
| | Used Everyday Wearing Apparel | \$500.00 | \boxtimes | \$500.00 | 11 U.S.C. § 522(d)(3) | | | | | | | |
| | Line from Schedule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | | | |
| | City Pension Plan | \$82,213.00 | \boxtimes | \$82,213.00 | 11 U.S.C. § 522(d)(12) | | | | | | | |
| | Line from Schedule A/B: 21.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | | | | |

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| Deb | otor 1 Leea Woodlin | | Case number (if known) | n) 24-11326 | | | |
|-----|---|--------------------------------------|------------------------|---|------------------------------------|--|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption | | |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | | |
| | Deferred Compension Program Line from Schedule A/B: 21.2 | \$19,000.00 | \boxtimes | \$19,000.00 | 11 U.S.C. § 522(d)(12) | | |
| | Line from Schedule AVB. 21.2 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Claim against Farmers Insurance for | \$21,000.00 | \$21,000.00 | \$15,425.00 | 11 U.S.C. § 522(d)(5) | | |
| | recovery of damages associated with personal injuries suffered in January 2024 car accident. Represented by Mednick Mezyk & Kredo. Line from Schedule A/B: 33.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Claim against Farmers Insurance for | \$21,000.00 | \boxtimes | \$5,575.00 | 11 U.S.C. § 522(d)(11)(D) | | |
| | recovery of damages associated with personal injuries suffered in January 2024 car accident. Represented by Mednick Mezyk & Kredo. Line from Schedule A/B: 33.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| 3. | Are you claiming a homestead exemption o (Subject to adjustment on 4/01/25 and every 3 No Yes. Did you acquire the property covered No Yes | years after that for ca | ses fi | • | , | | |